PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10121200

CLAIMS AS FILED - PART					t			SMALL ENTITY			OTHER	
T CI ANIC			(Column 1)		(Column 2)		١ .	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			8		L			RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			⊘ minus 20=		•			XS 9=		OR	X\$18=	•
INDEPENDENT CLAIMS			minus 3 =					`X43=		OR	X86÷	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		ОЯ	+290=	
* If the difference in column 1 is less than zero, enter					"0" in c	column 2	•	TOTAL		OR	TOTAL	77.7
	C	LAIMS AS A) - PAR1	T II					•	OTHER	THAN	
		(Column 1)		(Colum	_	(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	11/18/05	CLAIMS REMAINING AFTER AMENDMENT	-	MIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATÉ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 1	Minus	-2	0	-		X\$ 9=		OR	X\$18=	
	independent	• /	Minus	3	<u> </u>			X43=		OR	X86*	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							L	TOTAL ODIT, FEE		OR	TOTAL ADDIT, FEE	
5-9-0(, (Column 1) (Column 2) (Column 3)									•			
AMENDMENT B	_	CLAIMS REMAINING AFTER AMENOMENT		MIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• · · · · · · · · · · · · · · · · · · ·	Minus	- 20	•	• /·	l	X\$ 9=	. /	OR	X\$18=	
	Independent	•]	Minus	*** }		- /.		X43=	/	OR	X86=/	
_	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM	. /		+145=	/	OR	+290=	
								TOTAL	/		TOTAL	
(Column 1) (Column 2) (Column 3)								DOIT. FEE i			ADDIT. FEEL	
ENTC	`	CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE NUMB PREVIOUS PAID F	ST ER USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE	1	RATE	ADDI- TIONAL FEE
AMENDME	Total	•	Minus	•		• .	r	X\$ 9=		OR	X\$18=	
2	Independent	•	Minus	***		7		X43=			X86≈	
<	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
							L	+145=	1	OR	+290=	
- 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR ,	TOTAL DOT, FEE	
		mber Previously Pa ber Previously Paid						DOIT. FEE L of in the app	ropriate box	in cah		•
0814	PTO-875 /Pm 10	·m					Date	t and Traderio	Mi Office 113	. nen	ATMENT OF	CONNEGCS